ASPIRUS LILLIAN KERR HC CENTER

2383 STATE HWY 17

PHELPS 54554 Phone: (715) 545-2589 Ownership: Non-Profit Corporation Operated from 1/1 To 12/31 Days of Operation: 366 Highest Level License: Skilled Operate in Conjunction with Hospital? Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/04): 79 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/04): 79 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/04: 72 Average Daily Census: 71

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (12/31/04)	Length of Stay (12/31/04)	%
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	%	Age Groups	%	 Less Than 1 Year 1 - 4 Years	37.5 47.2
Supp. Home Care-Household Services	No	Developmental Disabilities	1.4	Under 65	1.4	1 - 4 lears More Than 4 Years	15.3
Day Services	No	Mental Illness (Org./Psy)	50.0	65 - 74	5.6		
Respite Care	Yes	Mental Illness (Other)	1.4	75 - 84	36.1		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	44.4	********	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	2.8	95 & Over	12.5	Full-Time Equivalent	
Congregate Meals	Yes	Cancer	1.4			Nursing Staff per 100 Res	idents
Home Delivered Meals	Yes	Fractures	2.8	İ	100.0	(12/31/04)	
Other Meals	No	Cardiovascular	13.9	65 & Over	98.6		
Transportation	No	Cerebrovascular	8.3			RNs	7.6
Referral Service	Yes	Diabetes	1.4	Gender	%	LPNs	8.3
Other Services	No	Respiratory	4.2			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	12.5	Male	26.4	Aides, & Orderlies	38.6
Mentally Ill	No			Female	73.6		
Provide Day Programming for			100.0	İ			
Developmentally Disabled	No			İ	100.0		
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Method of Reimbursement

		Medicare Title 18			edicaid itle 19			Other			Private Pay	2		amily Care			anaged Care	l		
Level of Care	No.	%	Per Diem (\$)	No.	8	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	1	2.0	138	0	0.0	0	1	7.1	193	0	0.0	0	0	0.0	0	2	2.8
Skilled Care	6	100.0	362	48	94.1	119	1	100.0	137	13	92.9	163	0	0.0	0	0	0.0	0	68	94.4
Intermediate				2	3.9	100	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	2.8
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende:	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	6	100.0		51	100.0		1	100.0		14	100.0		0	0.0		0	0.0		72	100.0

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/04
Deaths During Reporting Period		 			% Needing		Total
Percent Admissions from:		Activities of	%		sistance of	% Totally	Number of
Private Home/No Home Health	14.9	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	1.4	Bathing	0.0		70.8	29.2	72
Other Nursing Homes	2.7	Dressing	20.8		44.4	34.7	72
Acute Care Hospitals	77.0	Transferring	26.4		41.7	31.9	72
Psych. HospMR/DD Facilities	0.0	Toilet Use	23.6		48.6	27.8	72
Rehabilitation Hospitals	0.0	Eating	54.2		26.4	19.4	72
Other Locations	4.1	******	******	*****	******	******	*****
Total Number of Admissions	74	Continence		%	Special Treatmen	ts	용
Percent Discharges To:		Indwelling Or Extern	nal Catheter	2.8	Receiving Resp	iratory Care	4.2
Private Home/No Home Health	10.8	Occ/Freq. Incontine	nt of Bladder	58.3	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	18.9	Occ/Freq. Incontine	nt of Bowel	45.8	Receiving Suct	ioning	2.8
Other Nursing Homes	2.7	_			Receiving Osto	my Care	1.4
Acute Care Hospitals	12.2	Mobility			Receiving Tube	Feeding	1.4
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	8.3	Receiving Mech	anically Altered Diets	34.7
Rehabilitation Hospitals	0.0					-	
Other Locations	6.8	Skin Care			Other Resident C	haracteristics	
Deaths	48.6	With Pressure Sores		5.6	Have Advance D	irectives	83.3
Total Number of Discharges		With Rashes		4.2	Medications		
(Including Deaths)	74	İ			Receiving Psyc	hoactive Drugs	54.2

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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		Owne	ership:	Bed	Size:	Lic	ensure:		
	This	This Nonprofit		50	-99	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	8	%	Ratio	8	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	89.9	87.4	1.03	85.5	1.05	85.9	1.05	88.8	1.01
Current Residents from In-County	66.7	76.6	0.87	71.5	0.93	75.1	0.89	77.4	0.86
Admissions from In-County, Still Residing	25.7	21.5	1.19	20.7	1.24	20.5	1.26	19.4	1.32
Admissions/Average Daily Census	104.2	125.9	0.83	125.2	0.83	132.0	0.79	146.5	0.71
Discharges/Average Daily Census	104.2	124.5	0.84	123.1	0.85	131.4	0.79	148.0	0.70
Discharges To Private Residence/Average Daily Census	31.0	51.0	0.61	55.7	0.56	61.0	0.51	66.9	0.46
Residents Receiving Skilled Care	97.2	95.2	1.02	95.8	1.02	95.8	1.01	89.9	1.08
Residents Aged 65 and Older	98.6	96.2	1.02	93.1	1.06	93.2	1.06	87.9	1.12
Title 19 (Medicaid) Funded Residents	70.8	69.6	1.02	69.1	1.03	70.0	1.01	66.1	1.07
Private Pay Funded Residents	19.4	21.4	0.91	20.2	0.96	18.5	1.05	20.6	0.95
Developmentally Disabled Residents	1.4	0.4	3.46	0.5	2.56	0.6	2.41	6.0	0.23
Mentally Ill Residents	51.4	40.3	1.27	38.6	1.33	36.6	1.40	33.6	1.53
General Medical Service Residents	12.5	17.9	0.70	18.9	0.66	19.7	0.63	21.1	0.59
Impaired ADL (Mean)	52.2	47.6	1.10	46.2	1.13	47.6	1.10	49.4	1.06
Psychological Problems	54.2	57.1	0.95	59.0	0.92	57.1	0.95	57.7	0.94
Nursing Care Required (Mean)	6.8	7.3	0.93	7.0	0.97	7.3	0.93	7.4	0.91